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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 8093

<b>SERIAL NUMBER</b> 10/635,333	<b>FILING OR 371(c) DATE</b> 08/06/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1651	<b>ATTORNEY DOCKET NO.</b> 010023-000150
<b>APPLICANTS</b> John H. Crowe, Davis, CA; Fern Tablin, Davis, CA; Willem Wolkers, Davis, CA; Naomi Walker, Davis, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/052,162 01/16/2002 PAT 6,770,478				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 48	<b>TOTAL CLAIMS</b> 61
<b>INDEPENDENT CLAIMS</b> 7				
<b>ADDRESS</b> 20350				
<b>TITLE</b> Therapeutic platelets and methods				
<b>FILING FEE RECEIVED</b> 916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	